

II. Blood Draw

*** To interviewers: prepare for drawing blood samples, and complete the following section.**

**Specimen
label**

- 1. Was any blood drawn? _ Y30
 0 no, reasons _____
 1 Yes
- 2. Was the two-minute limit for the tourniquet exceeded? _ Y31
 0 No
 1 Yes
- 3. What time was blood drawn (_ _ Hr _ _ Min)? _ _ : _ _ Y32

PHLEBOTOMIST NAME _____ PHLEBOTOMIST ID _ _ _ _ Y33

*** Below will be completed by person who processes blood samples**

- 4. Were blood spots collected? _ Y34
 0 No
 1 Yes
- 5. Were blood samples prepared for a routine blood test? _ Y35
 0 No
 1 Yes
- 6. Were blood samples prepared for biochemistry test? _ Y36
 0 No
 1 Yes
- 7. Were blood samples prepared for HbA1c test? _ Y37
 0 No
 1 Yes
- 8. What time was specimen Tube 1 (EDTA plasma tube) spun (_ _ Hr _ _ Min)? _ _ : _ _ Y38
- 9. What time was specimen Tube 2 (Serum Separate Tube) spun (_ _ Hr _ _ Min)? _ _ : _ _ Y39
- 10. What time were specimens stored at 4 °C (_ _ Hr _ _ Min)? _ _ : _ _ Y40
- 11. Indicate the vials were filled by entering number (0,1, 2) in box.

Tube	Handling	Aliquoting/Labeling Y41	Status
4 ml lavender	Rack/centrifuge	__ number of fresh whole blood stored (for HbA1C test), blue cap	4 °C
		__ number of EDTA plasma aliquots stored, green cap	Freeze
		__ number of buffy coat aliquots stored, white cap	Freeze
		__ number of RBC aliquots stored, red cap	Freeze
4 ml red x 2 tubes	Rack/centrifuge	__ number of serum aliquots stored, yellow cap	Freeze

Staff Name: _____ Staff ID: _____ _ _ Y42

Processing Date: _ _ _ _ Year _ _ Month _ _ Day _ _ _ _ _ _ Y43

**Specimen
label**

III. Test Results

Laboratory Name: _____

ID Number: _____ Y44

1. Blood Routine Test Results

Equipment model: _____

Blood sample serial # Y45	Hb (g/L) Y46	WBC (x 10 ⁹)	RBC (x 10 ¹²)	PLT (x 10 ⁹)

2. Blood Biochemistry Test Results

Equipment model: _____

Blood sample serial # Y47	Glucose (mmol/L) Y48	ALT (U/L)	TP (g/L)	ALB (g/L)	TC (mmol/L)	TG (mmol/L)

3. HbA1c Test Results

Equipment model: _____

Blood sample serial # Y49	HbA1c (mmol/L) Y50

Exam Date: ____Year __Month __Day ----- Y51

Tester Name: _____ ID Number: _____ -- Y52

Supervisor Name: _____ ID Number: _____ -- Y53

Please paste the original test reportS below

<p>PASTE ORIGINAL TEST REPORTS HERE</p>
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